## Welcome to

## The City of North Little Rock Residential Customers

Your Name:	
SSN: Driv	vers License Number:
Telephone: (home) (Do you currently have an unlisted home phone num	nber?)
Employer:	Work Telephone:
Spouse's Name:	
SSN: D	Orivers License Number:
Employer:	Work Telephone:
Owner:	Renter:
Landlord Name:	Landlord Telephone:
Address Moving <b>From</b> :	
(North Little Rock is interested in gathering this info  Deposit  Deposits are required for all Electric accounts us	Requirement nless customer is a senior citizen (over 62 years old), les a good letter of credit from the current Electric
Electric Deposit \$100.00	Inspection (if needed) \$7.50
	chorized Payment Program for Utility Customers. count up on this program, please initial below?
Accept	Decline
Signature:	Date:
	For Internal Use Only –C/S Clrk S/eDocs